## PART B - FEE(S) TRANSMITTAL

Complete affid send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885 MAY 3 0 2008 g

					3/1)-2/3-2883				
appropriate. All further indicated unless correct maintenance fee notifica	form should be used correspondence including below or directed ot tions.	for trans ng the P herwise	smitting the ISSI atent, advance of in Block 1, by (	UE FEE and PUBLICA rders and notification of a) specifying a new con	ATION FEE (if requirements of the second of	iired). I will be ;; and/or	Blocks I through 5 sl mailed to the current r (b) indicating a sepa	hould be completed whe correspondence address trate "FEE ADDRESS" f	
CURRENT CORRESPOND	ny change of address)	р	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanyin papers. Each additional paper, such as an assignment or formal drawing, muchave its own certificate of mailing or transmission.						
ADELI & TOI 1875 CENTUR' LOS ANGELES	LLEN, LLP Y PARK EAST, SU	5/2008 ITE 13	360	I S a tr	Ce hereby certify that the tates Postal Service of ddressed to the Mai ransmitted to the USF	rtificato nis Fec( with suf il Stop PTO (57	of Mailing or Trans; s) Transmittal is being ficient postage for firs ISSUE FEE address 1) 273-2885, on the d	mission g deposited with the Unite st class mail in an envelop above, or being facsimi ate indicated below.	
5/30/2008 CCHAU2	00000092 10039586				A	za	Chinaryan	(Depositor's name	
1 FC:1501 2 FC:1504	2:1501 1440.00 OP 2:1504 300.00 OP				5/27/2008 (Signature				
APPLICATION NO.	FILING DATE	<u> </u>	FIRST NAMED INVE		TTOR ATTORNEY DOCKET N		RNEY DOCKET NO.	CONFIRMATION NO.	
10/039,586 TITLE OF INVENTION	•				Steven Teig SPLX.P0048 2258 G ROUTES FOR GROUPS OF RELATED NET CONFIGURATIONS				
	•								
APPLN. TYPE	SMALL ENTITY	ISS	UE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO		\$1440	\$300	\$0		\$1740	05/27/2008	
EXAMINER			ART UNIT	CLASS-SUBCLASS	7				
BOWERS, BRANDON			2825	370-401000	_				
<ul> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ul>				2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE	PRINTED ON 1	THE PATENT (print or t	type)				
(A) NAME OF ASSIG				(B) RESIDENCE: (CIT	TY and STATE OR C	COUNT	RY)	ocument has been filed for	
					·				
lease check the appropri	ate assignee category or	categori	cs (will not be pr	inted on the patent):	Individual W Co	orporation	on or other private gro	up entity Governmen	
la. The following fee(s) are submitted:    Issue Fee   Publication Fee (No small entity discount permitted)   Advance Order - # of Copies				b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached and additional.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3804 (enclose an extra copy of this form).					
a. Applicant claims	us (from status indicated	s. Sec 37	7 CFR 1.27.	☐ b. Applicant is no lo	onger claiming SMAI	LL ENT	TTY status. See 37 CF	R 1.27(g)(2).	
NOTE: The Issue Fee and nterest as shown by the r	I Publication Fee (if requeecords of the United Sta	iired) wi tes Paten	Il not be accepted it and Trademark	I from anyone other than Office.	the applicant; a regi	stered a	ttomey or agent; or the	e assignce or other party in	
Authorized Signature	bik	al.	()		Date	5/	27/08		
Typed or printed name	ALIM	AKC	· ·		Registration N	lo	45, 536		
his collection of informa n application. Confident ubmitting the completed his form and/or suggestions 1450. Alexandria, Vi	ation is required by 37 C iality is governed by 35 application form to the ons for reducing this bur rginia 22313-1450. DO	FR 1.31 U.S.C. I USPTO den, sho NOT SI	1. The informatio 22 and 37 CFR I . Time will vary uld be sent to the END FEES OR C	n is required to obtain or 1.14. This collection is c depending upon the ind Chief Information Offic COMPLETED FORMS	r retain a benefit by the estimated to take 12 r ividual case. Any co cer, U.S. Patent and TO THIS ADDRESS	he publi ninutes mments Tradem	c which is to file (and to complete, including on the amount of time ark Office, U.S. Depart	by the USPTO to process g gathering, preparing, and the you require to complete trument of Commerce, P.O.	

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.